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SECRETARY OF STATE

STATE OF SOUTH DAKOTA
Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER		2. DATE
ROSHOLT REVIEW		9/16/2021
3. FREQUENCY OF ISSUE	3A. NO. OF ISSUES PUBLISHED ANNUALLY	3B. ANNUAL SUBSCRIPTION PRICE $
WEEKLY	52	60, 465

4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers)
10 WEST MAIN ST, ROSHOLT, SD 57260

5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers)
1608 BROADWAY AVE, WHEATON, MN 56296

6. FULL NAME OF PUBLISHER:
KALEY BRUMM

7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.

FULL NAME	COMPLETE MAILING ADDRESS
MK ENTERPRISES LLC	1114 BROADAY, WHEATON, MN 56296

8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	700	700
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors, and counter sales.	40	41
2. Mail Subscription (Paid and or requested)	541	508
3. Paid Electronic Copies		
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	581	549
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS	3	3
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES		
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	584	554
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	116	146
2. Return from News Agents		
G. TOTAL (Sum of E, F1 and F2 – Should equal total shown in A.)	700	700

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public
I swear that the statements made by me are true, correct, and complete:

(Signature)

OWNER
(Title)

State of South Dakota)
§
County of ROBERTS)

Sworn to before me this 22 day of Sept, 2021

Kim Fridgen
Notary Public

My commission expires: 1/31/26

(Seal)

KIM M. FRIDGEN
NOTARY PUBLIC - MINNESOTA
My Commission Expires Jan. 31, 2026

Form: SOS REC 051 9/2016

Kaley Brumm 1608 BROADWAY AVE., WHEATON, MN 56296

MICHAEL Brumm 1608 BROADWAY AVE., WHEATON, MN 56296

MICHAEL Kremer 6489 HWY 27, WHEATON, MN 56296